

2010 MAY 19 PM 3:26

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th St. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Effective January 1, 2010, all statements and reports filed by new committees for state office must be filed electronically and effective January 1, 2012, all statements and reports filed by all committees for state office must be filed electronically.
Effective May 1, 2010, all statements and reports for State PACs and State Parties must be filed electronically.

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Williams

IMPORTANT: Indicate by # type of committee you are reporting for: ☒ 1
(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

FORM DR-2
(Rev. 12/2009)

DISCLOSURE REPORT

For Office Use Only

Comm. # 1753

Logged In 3

Scanned _____

Computer _____

Audited _____

CANDIDATE COMMITTEES ONLY:

Candidate Name Nate Williams Political Party (if applicable) Democrat

Office Sought Iowa House District (if Senate or House) 29

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a candidate's committee, and the chairperson, for any other type of committee, is the individual responsible for filing timely and accurate reports.

M. J. Gersmeyer 319 898 8931 5-19-10
SIGNATURE OF PERSON FILING REPORT TELEPHONE DATE SIGNED

I AM FILING A 5-19-10 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate by # ☒ 1

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election _____

County & Local Committees, enter County in which Election is held _____

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.) \$ 14,302.65

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below) 9,330.-

Schedule F: Loans Received total (Attach Schedule F) 0.-

Schedule H: Total Sales of Campaign Property (Attach Schedule H) 0.-

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$ 23,632.65

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below) 1,490.27

Schedule F: Loan Repayments total (Attach Schedule F) 0.-

CASH ON HAND at the end of this reporting period (if final report balance must be zero) \$ 22,142.38

***UNPAID BILLS** (From Schedule D - Attach Schedule D) \$ _____

***IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E) \$ 14.65

***OUTSTANDING LOANS** (From Schedule F - Attach Schedule F) \$ 700.-

CONSULTANT BREAKDOWN (Schedule G Attached?) YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H) \$ _____

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Bridge Bank MT Vernon

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
1-19-10	ID# CK# 1140	AMAR WEISMAN 103 E MT Royal Ave 3-761 BALTIMORE, Md 21202		\$ 25.-	<input checked="" type="checkbox"/>
1-19-10	ID# CK# 6331	CARALYN PALMER 1845 Springville Rd MT VERNON, IA 52314		100.-	<input checked="" type="checkbox"/>
1-19	ID# CK# 1686	ANDRA ATHERBERRY 20 Roxburgh Dr Bella Vista, AR 72715		100.-	<input checked="" type="checkbox"/>
1-19	ID# CK# 9079	CATHERINE BLANDO 389 Gr. Valley Tr SE Cedar Rapids, IA 52403		200.-	<input checked="" type="checkbox"/>
1-19	ID# CK# 1779	GREG CROSS 3401 SE 18th St Des Moines, IA 50320		200.-	<input checked="" type="checkbox"/>
1-19	ID# CK# 6726	SHIRLEY STAPLETON 702 S. Locust Jefferson, IA 50129		200.-	<input checked="" type="checkbox"/>
1-19	ID# CK# 1347	SUSAN CELL 302 2nd St MT VERNON, IA 52314		25.-	<input checked="" type="checkbox"/>
1-19-10	ID# CK# 7372	KENT FULLER 5285 Rappenkamp 3 Dr Rivergide, IA 52327		50.-	<input checked="" type="checkbox"/>
1-19-10	ID# CK# 994440	NICHOLAS JOHNSON PO Box 1876 Iowa City, IA 52244		25.-	<input checked="" type="checkbox"/>
1-19-10	ID# CK#	DEVON GEORGE 163 W 18th St 9B New York, NY 10011		250.-	<input type="checkbox"/>
SUB-TOTAL				\$ 1175.-	
TOTAL (If last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 5
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)		MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM		

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Williams

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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CAUTION: Section 68B.32A(8), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
2-12-10	ID# CK# 2840	Delores S. Lifson 219 6th Ave N.W MT VERNON, IA 52314		\$ 60.-	<input type="checkbox"/>
2-12-10	ID# CK# 10332	BARBARA Buss 718 Summit St Iowa City, IA 52240		50.-	<input type="checkbox"/>
2-12-10	ID# CK# 7605	Laura Phillips 1033 Bayberry Dr Canonsburg, Pa 15317		100.-	<input type="checkbox"/>
2-12-10	ID# CK# ACT Blue	Katie Musting 1390 KENYON ST. NW Washington, DC 20010		25.-	<input type="checkbox"/>
3-31-10	ID# CK# 8590	Margaret A Smith 912 N 13th St Fort Dodge IA 50501	wife's grandmother	100.-	<input type="checkbox"/>
3-31-10	ID# CK# 6051	Gun Denhart 420 NW 11th Ave Unit 1205 Portland, OR 97209		100.-	<input type="checkbox"/>
3-31-10	ID# CK# 6619	R. Larson PO Box 8673 Cedar Rapids, IA 52408		25.-	<input type="checkbox"/>
3-31-10	ID# CK# 6097	Patrick J Muller 420 Iowa St / PO Box 406 Hills, IA 52235		10.-	<input type="checkbox"/>
3-31-10	ID# CK# (Cash)	Bob Balkantyne Dows St Pella, IA		40.-	<input type="checkbox"/>
3-31-10	ID# CK# 11423	Kathleen Bass 7 Sylvan Ln Cedar Rapids, IA 52403		100.-	<input type="checkbox"/>

SUB-TOTAL

\$ 610

TOTAL (if last page of this schedule)

\$

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Page 2 of 2
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Willem's

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
4.30.10	ID# CK# 1584	EMMA SALUSTRO 843 N. WASHINGTON #2 CHICAGO, ILL. 60622		\$ 200.-	<input type="checkbox"/>
4.30.10	ID# CK# 1179	DANIEL TEDD 3917 BENTON ST. N.W. WASHINGTON, DC 20007		250.-	<input type="checkbox"/>
4.30.10	ID# CK# 7391	Robert Rush 900 2ND ST SE #605 CEDAR RAPIDS, IA 52401		500.-	<input type="checkbox"/>
4.30.10	ID# 6414 CK# 1018	Hawkeye Labor Council 1211 WILEY BLD. CEDAR RAPIDS, IA 52404		750.-	<input type="checkbox"/>
4.30.10	ID# CK# 5435	CHARLES HALSEY 419 3RD ST. N.W. MT. VERNON, IA 52314		25.-	<input type="checkbox"/>
4.30	ID# CK# ACT Blue	Adam Weiss 1719 GRAND AVE #229 DES MOINES, IA 50309		10.-	<input type="checkbox"/>
4.30	ID# CK# ACT Blue	AARON KASS 1104 POND CYPRESS DRIVE VIRGINIA BEACH, VA 23455		100.-	<input type="checkbox"/>
4.30.10	ID# CK# ACT Blue	Sarah Armstrong 1600 E Bremer Ave Waverly, IA 50677		250.-	<input type="checkbox"/>
4.30.10	ID# CK# ACT Blue	Richard Brooks 1423 BRANCHWATER Circle BIRMINGHAM, AL 35216		100.-	<input type="checkbox"/>
4.30.10	ID# CK# ACT Blue	DANIEL Boudette 1916 S AUSTIN DR SIOUX FALLS, SD 57105		100.-	<input type="checkbox"/>

SUB-TOTAL

\$2,220.-

TOTAL (If last page of this schedule)

\$

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Page 3 of
(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for Williams

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
4.30.10	ID# CK# ACT Blue	Luke Quandt 114 A Mansfield Hollow Rd MANSFIELD CENTER, CT 06250		\$ 100.-	<input type="checkbox"/>
4.30.10	ID# CK# ACT Blue	Christopher Yetter 1300 QUARRY CT #411 RICHMOND, CA 94801		200.-	<input type="checkbox"/>
4.30.10	ID# CK# ACT Blue	Nick Ennis 228 W 71ST ST #9B NEW YORK, NY 10023		25.-	<input type="checkbox"/>
4.30.10	ID# CK# ACT Blue	Sandra Goveja 326 MAIN ST #A Springfield, OR 97477		125.-	<input type="checkbox"/>
4.30.10	ID# CK# ACT Blue	MATTHEW BRENNA 325 E 40th ST #30F NEW YORK, NY 10016		500.-	<input type="checkbox"/>
4.30.10	ID# CK# ACT Blue	Ryan Erlich 2048 S. BUCHANAN #C2 Arlington, VA 22206		125.-	<input type="checkbox"/>
5.10.10	ID# CK# ACT Blue	David Gootzit 900 N Stuart St #1014 Arlington, Va. 22203		50.-	<input type="checkbox"/>
5.10.10	ID# CK# ACT Blue	Jennifer Sherer 3019 Pinecrest Rd Iowa City, IA 52245		50.-	<input type="checkbox"/>
5.10.10	ID# CK# 2169	Deb Liddle 4131 S. Chase Ct Iowa City, IA 52245		25.-	<input type="checkbox"/>
5.10.10	ID# CK# 1028	Siroos Shirazi 3670 Forest Gate NE Iowa City, IA 52240		25.-	<input type="checkbox"/>

SUB-TOTAL

TOTAL (if last page of this schedule)

\$1,225.-
\$

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Page 4 of (for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN
(including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Citizens for John Williams

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
5.10.10	ID# 6113 CK# 4185	AFSCME Council 61 4320 N.W. 2nd Ave DES MOINES, IA 50312		\$ 2,000.-	<input type="checkbox"/>
5.15.10	ID# CK# 1290	Jack Terman 1708 CARMET DR. PLANO, TX 75075		300.-	<input type="checkbox"/>
5.15.10	ID# CK# Act Blue	J. Stuart-Tietelbaum 300 MASSACHUSETTS AVE. NW WASHINGTON, DC 20001		200.-	<input type="checkbox"/>
5.15.10	ID# CK# Act Blue	John Horgan 601 W. 57th ST NEW YORK, NY 10019		100.-	<input type="checkbox"/>
5.15.10	ID# 6070 CK# 3931	Iowa LAW PAC 625 E Court Ave DES MOINES, IA 50309		500.-	<input type="checkbox"/>
5.15.10	ID# N.A. CK# 20562	IBEW Ed. Comm. 900 7th ST. N.W. WASHINGTON, DC 20001		1,000.-	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

TOTAL (If last page of this schedule)

\$4,100.-
\$ 9,330.-

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Page 5 of 5
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Receipt Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens For Williams

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1-15-10	ID# CK# 1175	Phillips Ed PO Box 689060 Des Moines, IA 50318	ADDRESS Stamp	\$ 9.99
1-17-10	ID# CK# ON LINE	Act Blue PO Box 382110 Cambridge, MA 02238	TRANSMITTAL Rpt.	9.88
2-12-10	ID# CK# ON LINE	Act Blue PO Box 382110 Cambridge, MA 02238	TRANSMITTAL Rpt.	.99
2-12-10	ID# CK# 1176	Wired FOR Change 1700 Connecticut Ave Washington, D.C. 20009	ACCESS to DLCC Web online	120.-
2-12-10	ID# CK# 1177	IA. DEM. PARTY 5601 Fleur Dr. Des Moines, IA	DONATION	1,000.-
4-30-10	ID# CK# ON LINE	ACT Blue PO Box 382110 Cambridge, MA 02238	TRANSMITTAL Rpt.	14.23
4-30	ID# CK# ON LINE	ACT Blue PO Box 382110 Cambridge, MA 02238	TRANSMITTAL Rpt.	50.37
4-17	ID# CK# 1178	USPS Lisbon, IA 52253	Stamps	44.-
SUB-TOTAL				\$ 1249.46
TOTAL (If last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(j).)

Page 1 of 2

(For Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Williams

DATE EXPENDED (MM/DD/YY)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
4.20.10	ID# CK# 1179	Sheryl Becher 4054 Crestview Cedar Rapids IA 54402	clerical	\$ 105. -
4.20.10	ID# CK# 1180	Wired for Change 1700 Connecticut Ave Washington DC 20009	Access to DLCC web	120. -
5.10.10	ID# CK# ON LINE	ACT Blue P.O. Box 382110 Cambridge, MA 02238	transmittal Rpt.	3.96
5.15.10	ID# CK# ON LINE	ACT Blue P.O. Box 382110 Cambridge, MA 02238	TRANSMITTAL RPT.	11.85
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 240.81
TOTAL (if last page of this schedule)				\$ 1490.27

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 68A.402(3)(f).)

Page 2 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Adoptive Care which was

SCHEDULE E (Rev. 05/97)	IN-KIND CONTRIBUTIONS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

DATE RECEIVED (MM/DD/YYR)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
5-13-10	TRUMAN FUND 5661 FLEW DR. DES MOINES, IA 50321		Food	\$ 14.65	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$

TOTAL (if last
page of this
schedule) \$ 14.65

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Citizens for Williams

NOTE: This schedule reports money loaned to the committee which is deposited in the committee account.

TOTAL UNPAID LOANS FROM LAST REPORTING PERIOD \$ 700. -

SCHEDULE

F

(Rev. 02/08)

LOANS
RECEIVED
& REPAY

☐ CHECK THIS BOX IF
AMENDING FORM

PART I - MONETARY LOANS RECEIVED THIS REPORTING PERIOD

(Original source of loan, such as a bank, must be shown if a third party is involved. Include loans from candidate's personal funds.)

DATE RECEIVED (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE (If Applicable)	AMOUNT OF LOAN
			\$

TOTAL (PART I)

\$ 0

PART II - MONETARY LOAN REPAYMENTS MADE THIS REPORTING PERIOD

(Loans forgiven must be reported on Schedule E - In-kind Contributions.)

DATE PAID (MM/DD/YR)	NAME AND ADDRESS OF LENDER (Include Endorser's Name, if Applicable)	RELATIONSHIP TO CANDIDATE* (If Applicable)	AMOUNT REPAYED
			\$

TOTAL CASH REPAYMENTS (PART II)

\$ 0

From Schedule E - TOTAL LOANS FORGIVEN

\$

TOTAL OUTSTANDING LOANS END OF REPORT PERIOD

\$ 700. -

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Page 1 of 1
(for Schedule F)